FORM 500

Department of Taxation P.O. Box 1500 Richmond, VA 23218-1500

2002 Virginia Corporation Income Tax Return



FISCAL year filer or SHORT year file	er: ENTER beginning date,	and ending date	e,and CF	HECK HERE
Check if —	Name			Official use only
A Change in Address	Number and street			
B Consolidated Return	Number and street			
C Combined Return	Address continued			Federal Employer
D Multistate Schedule	Address continued			Identification Number
E Final Return	City or town, state and ZIP Code			
(No longer liable for tax)				
	Date Incorporated	State or Country		Virginia Corporation Account Number
				Vilginia del peralleri / leesarik (Variber
	Principal Business Activity Co	ode Description of Business Activity		
If your tax return is filed receive a corporate pack	on computer generated tet next year, place an "X	forms or forms supplied by a ta " in the box to the right.	ax preparer and you do not need	to
IMP	ORTANT: ATTAC	H A COPY OF YOUR	FEDERAL RETURN TO	THIS RETURN
		m 500-X To Amend The		
1 Federal taxable inco	ome (from attached fe	ederal return)		1
	·	· · · · · · · · · · · · · · · · · · ·		
(b) Fixed Date Conf	` '			
(c) Additions (from I	ine 28)			(c)
3 Total [add lines 1 an	nd 2 (a), (b) & (c)]			3
4 (a) Fixed Date Con	formity Subtraction (d	epreciation-see instructions	s)	4(a)
(b) Fixed Date Conformity Subtractions (other- see instructions)				
(c) Subtractions (from line 37)				(c)
	· · · · · · · · · · · · · · · · · · ·			
=			ns)	
7 Virginia taxable inco	ome (subtract line 6 fr		·	
8 Multistate Corporat			2 4.\	
		chedule A, line 16)		
(b) Apportionment fa (c) Nonapportionab	<u>%</u>			
		n loss	` '	
(a) Nonapportionab	ic investment function	11 1033		
9 Income tax [6% of li	ne 7 or of line 8(a)1.			9
		ount from Form 500CR, line		10
11 Adjusted corporate to	ax (subtract line 10 fro	om line 9)		11
12 Payments: (a) 2002	estimated Virginia inc	come tax payments	(a)	
(b) Prior	year's overpayment .		(b)	
(c) Paym	ent with extension red	quest and other payments	(c)	
(d) Total	Refundable Credits fr	om Form 500CR, line 108	(d)	•
Total payment cred	lits [add lines (a), (b),	(c) and (d)]		12
13 Tax due (subtract lin	ne 12 from line 11)			13
14 Penalty (see instruc	14			
15 Interest (see instruc	15			
16 Additional charge (a				
	·		if paid by EFT, check this box:	
·				
	•	•		
21 Coalfield Employme	ent Enhancement Tax	Credit earned	21	

PART I — Addition	ns to Federal Taxable Income (attach schedules):		Page 2		
22 Net income taxes an	d other taxes which are based on, measured by or computed with				
	me				
	gations other than Virginiasociation's federal bad debt deduction				
•	axable income as defined by Section 512 of the IRC (to the extent	24			
	, Page 1)	25			
	P Credit carryover deducted under Section 404(i) of the IRC				
27 Other					
28 Total — Enter this ar	nount on line 2(c)	28			
PART II — Subtra	ctions from Federal Taxable Income (attach schedul	es):			
	ons or securities of the United States exempt from state t from federal income taxes	20			
30 Foreign dividend gro					
31 Refund or credit of in					
	ection 951 IRC)				
	es and wages not deducted due to the federal work opportunity tax credit	i 33			
_	ne as defined by Virginia Code Section 58.1-402 C.8.	2.4			
•	limitations) rom corporations in which the recipient owns fifty percent or more	34			
of the voting stock ar					
-					
37 Total — Enter this ar	nount on line 4(c)	37			
PART III — Questi 38 The corporation's bo	ons oks are in care of, located at				
	·				
•	tion is a farmers' marketing or a farmers' purchasing cooperative associ	ation	. a consum	ers'	
•	tion, or other cooperative association		,		
	s deduction (NOL) was claimed in computing federal taxable income on		ration Income Tax	(
· · · · · ·	e following information:				
•	-				
Year of loss Federal NOL					
	nan one loss year are involved, attach a schedule.	.ca tino year			
	come tax liability been redetermined for any prior year(s) which has n	ot previously k	neen reported to	the	
-	of Taxation? YesNo If "yes," state years	•	-		
	rate cover and mail to Virginia Department of Taxation, P.O. Box 1880, F				
	ne Virginia Department of Taxation, P.O. Box 1500, Richmond, Virginia 2321	•			
day of the fourth mo	onth following the close of the taxable year. Make checks payable to the	/irginia Departr	nent of Taxation.		
	DECLARATION				
return is made, declare under the best of my knowledge and belie	ce-president, treasurer, assistant treasurer, chief accounting officer, or other officer duly auth ne penalties provided by law that this return (including any accompanying schedules and statem if, a true, correct, and complete return, made in good faith, for the taxable year stated, pursuan son other than taxpayer, their declaration is based on all information of which they have any leads to the control of the control	nents) has been exa t to the income tax	amined by me and is, to	o the	
(Date)	(Signature of officer)		Title)		
(Date)	(Individual or firm, signature of preparer, and phone number)	- (A	ddress)		
If this farms	Preparer's SSN or FEIN				
ILIUIS TOTTI WAS COMBIL	ter generated, check this box. Certified Vendor ID.				